FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	(See instructi			Office use only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
CONCERNED WOI	MEN FOR AMERICA LEGISI	ATIVE ACTION COMMITTE	E POLITICAL A	CT-
ADDRESS (number and street)	PO Box 66680			
(Check if address				
is changed)	Washington		DC	20035   -
COMMITTEE'S E-MAIL AD	DRESS	CITY▲	STATE▲	ZIP CODE 📥
info@cwpac.org				
				<u> </u>
COMMITTEE'S WEB PAG	E ADDRESS (URL)			
www.cwpac.org				
COMMITTEE'S FAX NUME 2024785234	BER			
2. DATE 0.3	23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICATION	NUMBER	C C00375865		
4. IS THIS STATEMENT	X NEW (N) OR	AMENDED (A)		
I certify that I have examined the	nis Statement and to the best of my kr	nowledge and belief it is true, correct a	and complete	
Type or Print Name of Treas	surer Lee LaHaye			
Signature of Treasurer E	electronically Filed by Lee LaHa	aye	Date 03	/ 23 / Y Y Y Y Y Y
NOTE: Submission of false, er	rroneous, or incomplete information m	ay subject the person signing this Sta	•	s of 2 U.S.C. S437g.
Office Use Only		For further information Federal Election Commi Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2003)

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5.	TYPE OF COMMITTEE (Check One)				
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)				
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	candidate			
	Name of Candidate				
	Candidate Party Affiliation Office Sought: House Senate President	State District			
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name of Candidate				
	(d) This committee is a (or subordinate) committee of the Roll  (e) X This committee is a separate segregated fund	Democratic, epublican,etc.) Party.			
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated for committee.	und or party			
3.	Name of Any Connected Organization or Affiliated Committee  CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION	COMMITTEE			
L	<u> </u>				
	Mailing Address PO Box 66680				
	Washington DC 20	0035			
	CITY▲ STATE ▲	ZIP CODE 🛦			
	Relationship				
	Type of Connected Organization:				
	Corporation Corporation w/o Capital Stock Labor Organization	tion			
	X Membership Organization Trade Association Cooperative				

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Write or Type Committee Name

<b>CONCERNED</b>	<b>WOMEN FOR</b>	<b>AMERICA LEGI</b>	SLATIVE ACT	ION COMMITT	TEE POLITICAL	<b>ACTION C</b>	-TIMMO:
TFF							

	<u>                                      </u>			
7.	Custodian of Records: Idea possession of Committee I	ntify by name, address, (phone numbe cooks and records.	r optional), and position of tl	ne person in
	Full Name Lee Lah	laye		
	Mailing Address	1015 15th Street, NW		
		Suite 1100		
		Washington	DC	20005
	Title or Position ♥	CITY A	STATE▲	ZIP CODE ▲
	Treasurer		Telephone number	
8.		and address (phone number optional designated agent (e.g., assistant treası		ittee; and the
	Full Name of Treasurer Lee Lah	laye		
	Mailing Address	1015 15th Street, NW		
		Suite 1100		
		Washington		20005
	Title or Position ♥	CITY A	STATE▲	ZIP CODE ▲
	Treasurer		Telephone number 202	488 7000
	Full Name of Designated Agent			
	Mailing Address			
	Title or Position ♥	CITY A	STATE A	ZIP CODE A
			Telephone number	

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9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.		
	Name of Bank, Depository, etc.		
	Sun Tru	est Bank	
	Mailing Address	PO Box 62227	
		Orlando FL	.   32862   _

STATE ∠

 $\textbf{ZIP CODE} \quad \triangle$ 

CITY 🗷